

TEXT OF PROPOSED REGULATIONS

In the following, underline indicates new text and ~~striketrough~~ indicates deleted text.

3030. Issuance and Possession of State Clothing and Linen.

(a) Each inmate shall be provided state clothing and linen pursuant to this section. Each item issued shall remain state property for which the inmate shall be accountable. State items shall be recalled and exchanged as directed by the institution head.

(b) Inmates shall possess only those items of state clothing and linen issued to them. Below are the standard inmate issues:

(1) Each inmate shall be issued:

(A) Work shoes, one pair.

(B) Sheets, two.

(C) Pillow case, one.

(D) Towels, two.

(E) Blankets, two.

(F) The distinctive, protective and/or extra clothing required by the climate and/or the inmate's job assignment.

(2) In addition to the items in (1) above, each male inmate shall be issued:

(A) Jeans, blue denim, three pair.

(B) Shirts, blue chambray, three.

(C) Undershirts, white, four.

(D) Socks, six pair.

(E) Undershorts, white, four pair.

(F) Jacket, blue denim, one.

(G) Belt, web, one.

(3) In addition to the items in (1) above, each female inmate shall be issued:

(A) Blouses/T-shirts, three.

(B) Slacks, three pair.

Subsections 3030(b)(3)(C) and (D) are amended to read:

(C) ~~b~~Bras, three each six months.

(D) Dress, muumuu, robe or duster; one.

(E) Coat, one.

(F) Panties, five pair each six months.

(G) Nightgown, one.

(H) Socks, six pair.

New subsection 3030(b)(3)(I) is adopted to read:

(I) Pregnant inmates shall be issued one additional, larger pair of shoes.

Subsections 3030(c) through 3030(e) are unchanged.

NOTE: Authority cited: section 5058, Penal Code. Reference: Sections 2084 and 5054, Penal Code.

3050. Regular Meals.

Subsection 3050(a) is amended to read:

(a) Each inmate shall be provided a wholesome, nutritionally balanced diet. Nutrition levels shall meet the ~~re~~Recommended daily Dietary aAllowances and Dietary Reference Intakes as established by the Food and Nutrition Board of the Institute of Medicine, National Research Council Academy of Science.

(1) Inmates confined in segregated housing shall be served food representative of that being served to general population inmates. Food shall not be withheld nor standard menu varied as a disciplinary sanction for any inmate.

(2) Inmates shall be provided three meals each day, two of which shall be served hot. Variations to the two hot meals per day requirement may be allowed to accommodate religious observances, religious meal programs, and institution emergencies. The breakfast meal shall be served not more than 14 hours following the previous day's evening meal.

New subsection 3050(a)(3) is adopted to read:

(3) Pregnant inmates shall receive two extra cartons of milk, two extra servings of fresh fruit, and two extra servings of fresh vegetables daily. A physician may order additional nutrients as necessary.

(b) Facility menus shall be prepared at least one week in advance and posted in locations accessible to all general population inmates. Inmates in segregation housing shall, upon request, be provided a weekly menu.

NOTE: Authority cited: section 5058, Penal Code. Reference: Sections 2084 and 5054, Penal Code.

3268.2. Use of Restraints.

(a) Mechanical means of physical restraint may be used only under the following circumstances:

(1) When transporting a person between locations.

(2) When a person's history, present behavior, apparent emotional state, or other conditions present a reasonable likelihood that he or she may become violent or attempt to escape.

(3) When directed by medical staff, to prevent a person from attempting suicide or inflicting injury to himself or herself.

(b) Mechanical restraints shall not be:

(1) Used as punishment.

(2) Placed around a person's neck.

(3) Applied in a way likely to cause undue physical discomfort or restrict blood flow or breathing, e.g., hog-tying.

(4) Used to secure a person to a fixed object, except as a temporary emergency measure. However, a person who is being transported shall not be locked in any manner to any part of the transporting vehicle.

New subsection 3268.2(b)(5) is adopted to read:

(5) Placed on an inmate during labor, including during transport to a hospital, during delivery, and while in recovery after giving birth, unless circumstances exist that require the immediate

application of mechanical restraints to avoid the imminent threat of death, escape, or great bodily injury, and only for the period during which such threat exists.

Subsection 3268.2(c) is unchanged.

(c) When mechanical restraint is required, handcuffs, alone or attached to a waist chain, will be the means of restraint normally used. However, additional mechanical restraint, including leg irons, additional chains, straight jackets, leather cuffs, or other specialized restraint equipment may be used when the circumstances indicate the need for the level of control that such devices will provide.

Existing subsection 3268.2(d) is renumbered to new subsection 3268.2(e).

New subsection 3268.2(d) is adopted to read:

(d) Use of mechanical restraints on inmates confirmed, or suspected by health care staff to be pregnant but not in labor, shall be subject to the following requirements:

(1) No leg restraints or waist chains shall be applied.

(2) If handcuffs are applied, the inmate's arms shall be brought to the front of her body for application.

(3) When transporting a pregnant inmate off grounds, the application of restraint gear shall be restricted to handcuffs to the front of the inmate only. If the pregnant inmate is in labor, the rules provided in subsection 3268.2(b)(5) shall be followed.

Existing subsection 3268.2(d) is renumbered to new subsection 3268.2(e) and is unchanged.

~~(d)~~ Use of restraint equipment by direction of medical staff shall be fully documented in the institution medical file of the restrained inmate.

NOTE: Authority cited: section 5058, Penal Code. Reference: Sections 196, 835a, 2650, 2651, 2652, 2652.5, 3423, 5007.7 and 5054 Penal Code.

3355. Health Care Examinations.

Subsection 3355(a) is amended to read:

(a) Initial Examination. Every person newly committed or returned to the custody of the ~~Director of Corrections~~ Secretary of the California Department of Corrections and Rehabilitation shall be examined by health care staff for contagious diseases, illness, or other health ~~problems~~ conditions within 24 hours of arrival. In addition, female inmates will also be screened for pregnancy.

(b) Transfers. Inmates received on transfer from other facilities shall be interviewed by health care staff at the receiving facility within 24 hours of arrival. The health record of each new arrival shall be reviewed to determine the need for previously prescribed medications or continuing treatment for unusual or chronic health problems. Sending facility health care staff shall notify the receiving facility and any anticipated layover facilities regarding any inmate's need, as in the case of diabetics, for maintenance medications while en route and after arrival.

(c) Camp Assignment. Inmates shall be personally screened by a medical officer before receiving medical clearance for assignment to a camp or firefighting assignment. Such inmate shall be in generally good health and physically capable of strenuous and prolonged heavy labor without danger to the inmate's health and safety or the safety of others when involved in hazardous work such as forest firefighting. Exceptions: An inmate may be assigned to light duty non-hazardous work in a camp if a department physician specifically approves such assignment.

(d) Releases. Each inmate shall be personally screened by health care staff prior to release to parole or discharge from a facility. Staff conducting such screening shall alert the inmate's parole agent regarding any current health problems and shall provide the inmate with any necessary maintenance medication until the releasee can obtain medication in the community.

NOTE: Authority cited: Section 5058, Penal Code. Reference: Section 5054, Penal Code.

3355.1. Dental Examinations.

(a) Reception Centers. Inmates shall, during screening at a reception center, be provided only limited dental services necessary to meet basic needs. Such services shall include but are not

limited to treatment of injuries, acute infection, severe pain, or spontaneous bleeding, and repairs to dental prosthetic appliances.

(b) Assigned Facility. Each newly committed inmate shall within 14 days following transfer from a reception center to a program facility receive a complete examination by a dentist who shall develop an individual treatment plan for the inmate.

(1) When a treatment plan is proposed, the inmate shall be provided an explanation of its advantages and disadvantages.

(2) Each inmate's dental health history shall be documented at the time of initial examination and signed by the inmate and witnessed by a dental staff member. Such history shall be available and updated at each dental visit.

(3) An inmate unwilling to practice personal oral hygiene shall receive only that care necessary to relieve pain or treat infection. Routine treatment of nonacute oral conditions resulting from the inmate's neglect shall not be undertaken.

Existing subsection 3355.1(c) is renumbered to 3355.1(d)

New subsection 3355.1(c) is adopted to read:

(c) Pregnant inmates shall receive, within the second trimester of gestation, a dental examination and cleaning, and a periodontal evaluation. Each pregnant inmate shall receive the necessary dental care that will maintain periodontal health during the gestation period.

Existing subsection 3355.1(c) is renumbered to 3355.1(d) and is unchanged.

(ed) Reexamination. Each inmate under 50 years of age shall be examined at least once every two years. All other inmates shall be examined annually.

Existing subsection 3355.1(d) is renumbered to new subsection 3355.1(e) and is amended to read:

(de) Restraints. If an inmate requiring dental treatment also requires use of restraint gear, such restraints shall be selected to enable sitting in a dental chair and shall remain in place during the treatment. Exceptions require concurrence of the dentist, the escorting officer, and

a lieutenant. For pregnant inmates, the rules provided in subsections 3268.2(b) and (d) concerning the use of restraints shall be followed.

New section 3355.2 is adopted to read:

3355.2. Treatment for Pregnant Inmates.

(a) Inmates identified as possibly being pregnant during the initial health examination will be scheduled for laboratory work to verify the pregnancy within three business days of arrival at the institution.

(b) Confirmed pregnant inmates, within seven days of arrival at the institution, will be scheduled for an obstetrics (OB) examination by an Obstetrical Physician or Obstetrical Nurse Practitioner (NP) wherein:

(1) A term of pregnancy and a plan of care will be determined.

(2) Diagnostic studies will be ordered, if needed.

(c) Pregnant inmates shall be scheduled OB visits as follows, unless otherwise indicated by the OB physician or NP:

(1) Every 4 weeks in the first trimester up to 24 - 26 weeks gestation.

(2) Every 3 weeks thereafter up to 30 weeks gestation.

(3) Every 2 weeks thereafter up to 36 weeks gestation.

(4) Weekly after 36 weeks up to delivery.

(d) Pregnant inmates housed in a multi-tier housing unit will be issued a CDC Form 7410 (Rev. 08/04), Comprehensive Accommodation Chrono, which is incorporated by reference, for lower bunk and lower tier housing.

(e) Pregnant inmates who have used heroin within three days prior to incarceration, either by her own admission or written documentation by a parole agent, or are currently receiving methadone treatment, shall be enrolled in the Methadone Maintenance Program and recommended for immediate transfer to the California Institution for Women.

(f) Community treatment programs. Any community treatment program developed for eligible pregnant and/or parenting female inmates in addition to the Family Foundations Program, shall include, but not be limited to:

(1) Prenatal care.

(2) Access to prenatal vitamins.

(3) Childbirth education.

(4) Infant care.

(g) Any inmate who gives birth after her receipt by the Department shall be provided notice of, and a written application for, a community treatment program. At a minimum, the notice shall contain:

(1) Guidelines for qualification.

(2) Timeframe for application.

(3) Process for appealing a denial of admittance.

(h) A pregnant inmate who is not eligible for a community treatment program shall have access to complete prenatal health care, which shall include:

(1) A balanced, nutritious diet approved by a doctor.

(2) Prenatal and postpartum information and health care, including, but not limited to, access to necessary vitamins as recommended by a doctor.

(3) Information pertaining to childbirth education and infant care.

(4) Dental care pursuant to subsection 3355.1(c).

(i) Each pregnant inmate shall be referred to a Medical Social Worker. The Medical Social Worker shall:

(1) Discuss with the inmate, the options available for the placement and care of the child after delivery.

(2) Assist the pregnant inmate with access to a phone in order to contact relatives regarding newborn placement.

(3) Oversee the placement of the newborn child.

(j) A pregnant inmate may be temporarily taken to a hospital outside the institution for the purposes of childbirth and shall be transported in the least restrictive way pursuant to the rules provided in subsections 3268.2(b) and (d). A pregnant inmate in labor shall be treated as an emergency and shall be transported via ambulance to the outside facility, accompanied by custody staff.

(k) A pregnant inmate may elect to have a support person present during child birth. The support person may be an approved visitor or the institution's staff designated to assist with prenatal, labor and postpartum care. The approval for the support person will be made by the institution's Warden or designee. Reason for a denial shall be provided to the inmate in writing and must address the safety/security concerns for the inmate, infant, public, and/or staff.

(l) Postpartum care. Upon return to the institution, any inmate who delivers a child via C-Section, shall be admitted to the Outpatient Hospital Unit (OHU) or Clinical Treatment Center (CTC). Any inmate who delivers a child vaginally shall be assessed in the Triage and Treatment Area (TTA) to determine the appropriate housing and to initiate postpartum care.

(1) Orders for routine postpartum care shall be initiated by the Registered Nurse (RN) in the TTA, CTC, or OHU.

(2) The Supervising Obstetrician or RN/NP shall:

(A) Determine when the inmate is cleared for housing in the general population.

(B) Complete the medical lay-in.

(3) The inmate shall have a six week postpartum examination. At the examination, the Supervising Obstetrician or RN/NP shall determine whether the inmate may be cleared for full duty or if medical restrictions are still warranted.

NOTE: Authority cited: Section 5058, Penal Code. Reference: Sections 3419, 3423, 3424, 5007.7 and 5054, Penal Code.